



GlaxoSmithKline

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7<sup>th</sup> July 2004 [www.gsk.com](http://www.gsk.com)

**RE: "Electronic Records; Electronic Signatures; Public Meeting" Docket No. 2004N-0133.**

Dear Sir/Madam:

GlaxoSmithKline is a research-based pharmaceutical company engaged in the discovery, development, manufacture, and sale of pharmaceutical products. We welcome the opportunity to submit comments in response to FDA questions concerning Part 11.

- 1) **Part 11 Rulemaking** : GlaxoSmithKline supports the FDA's recent thinking on Part 11 embodied in the FDA's *Final Guidance on Scope and Application of Part 11* published August 2003. The revision of Part 11 in line with FDA's recent thinking will help foster innovation and facilitate the introduction of new technology to improve drug development and manufacturing processes (e.g. Process Analytical Technology). We recommend that FDA revise the Part 11 Rule to align it with this Final Guidance so that FDA-regulated industries have an up to date set of requirements consolidated in law.
- 2) **Scope** : We support and agree with the majority of the Agency's redefined scope of Part 11. We recommend that Part 11 be revised to emphasise the role of predicate rules to identify regulated records and signatures. It would be beneficial if FDA could define by which means specific records and signatures that come under the Rule can be identified in predicate rules (e.g. selection criteria, improved definition of record/signature). The focus of Part 11 should be on records and signatures rather than systems and data.
- 3) **Definitions** : Where possible, make Part 11 definitions consistent with previously established definitions (e.g. FDA Glossary of Computerized System and Software Development Terminology, ISPE/GAMP, ISO). In particular, we are interested in the clarification of the definition of General Signings to facilitate consistent compliance with the predicate rules.

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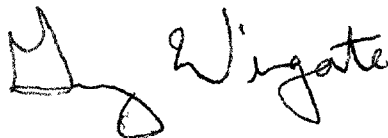
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- 4) **Submitted Records** : We suggest that the controls required for electronic records and signatures that are submitted to FDA as part of a dossier be addressed separately from the controls for those that are required to be maintained by the predicate rules in order to support the dossier. This change would distinguish more clearly between requirements for records forming part of a submission and requirements for those records that support subsequently submitted/inspected records.
- 5) **Risk Based Approach** : We welcome the opportunity to apply a risk based approach to electronic records as outlined in the FDA's *Final Guidance on Scope and Application of Part 11* published August 2003. We believe that a risk-based approach is applicable to all electronic record and signature controls and not just to audit trail, validation, record retention, and copying as currently specified in the FDA's *Final Guidance*. While facilitating a risk based approach we suggest that the Part 11 Rule should not define a specific risk methodology or specific tools. It should be left to individual organisations to define and document their approach.
- 6) **Level of Detail in Rule** : We propose that any revision of Part 11 should concentrate on what in principle is needed to satisfy the Rule rather than being prescriptive on the practicalities of how to fulfil the Rule. For Example:
  - a) the requirement in Part 11 for an audit trail could simply state its purpose to record the timing and/or sequence of key events initiated by an operator (e.g. analogous with paper records, it is not always necessary to record clock time in addition to date to demonstrate appropriate sequencing).
  - b) the distinction of open and closed systems is a level of detail that is not required in the Rule. The basic requirement to protect electronic record/signature authenticity and integrity is shared for both open and closed systems. The need to apply confidentiality controls would be based on risk.
  - c) Part 11 should have a single principle that operations are controlled in a secure manner. This would replace the existing requirements for 'limiting systems access', 'use of authority checks', password controls, and escalation of security breaches.
  - d) Part 11 should have a single principle that the execution of electronic signatures is governed in a controlled manner. This would replace the controls for signatures based on biometrics and the specific requirements about re-entering non-biometric signature components.
- 7) **Legacy Systems** : We support the FDA's *Final Guidance on Scope and Application of Part 11* published August 2003 criteria by which legacy systems in operation before the effective date of Part 11 are excluded from the regulation.
- 8) **Related FDA Guidance** : FDA's *Guidance on Computerized Systems Used in Clinical Trials* (1999) makes a number of references to Part 11. This and any other existing FDA guidance concerning electronic records and electronic signatures will need to be updated to align with any Part 11 revisions. Any related guidance should be issued at the same time of the revised Part 11 Rule.

- 9) **Redundant Rules:** We suggest that FDA should not be overly concerned that any revision of Part 11 Rule would duplicate particular predicate rule requirements since not all predicate rules address electronic record/signature controls to the same level (e.g. audit trail and validation).

GlaxoSmithKline supports the Agency in its decision to review aspects of Part 11. We recognise the difficulty the Agency has in being completely definitive in this area and appreciate the opportunity to comment. Thank you for your consideration.

Yours Sincerely,

A handwritten signature in black ink, appearing to read 'Guy Wingate', with a stylized initial 'G'.

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